

JC780 U.S. PTO
5/25/00

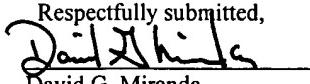
5-26-00

Express Mail Label No. EM400990306US

UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>	Attorney Docket No.	CTX-049
	First Named Inventor	Richard Hayton
	Title	ACTIVITY MONITOR AND RESOURCE MANAGER IN A NETWORK ENVIRONMENT

JC714 U.S. PTO
5/25/00

5/25/00

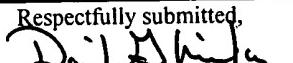
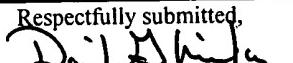
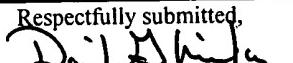
APPLICATION ELEMENTS		ADDRESS TO: Box Patent Application Assistant Commissioner for Patents Washington, D.C. 20231
1. <input checked="" type="checkbox"/> Fee Transmittal Form		ACCOMPANYING APPLICATION PARTS
2. <input checked="" type="checkbox"/> Specification and Drawings [Total Pages 31] - Specification - (18 pages) - Claims - (8 pages) - Abstract - (1 page) - Sheets of Drawings - (4 sheets) <input type="checkbox"/> Formal <input checked="" type="checkbox"/> Informal		7. <input type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an assignee) <input type="checkbox"/> Power of Attorney
		8. <input type="checkbox"/> English Translation Document (<i>if applicable</i>)
		9. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations
3. <input checked="" type="checkbox"/> Oath or Declaration [Total Pages 3] a. <input checked="" type="checkbox"/> Newly executed (original) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 17 completed)</i> <i>[Note Box 4 below]</i>		10. <input type="checkbox"/> Preliminary Amendment <input type="checkbox"/> Drawings [Total Sheets] <input type="checkbox"/> Letter to Official Draftsperson Including Drawings [Total Pages]
		11. <input checked="" type="checkbox"/> Return Receipt Postcard
4. <input type="checkbox"/> Incorporation by Reference (usable if Box 3b is checked) The entire Disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 3b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.		12. <input type="checkbox"/> Small Entity Statement(s) <input type="checkbox"/> Statements filed in prior application, (Status still proper and desired)
		13. <input type="checkbox"/> Certified Copy of Priority Document(s)
5. <input type="checkbox"/> Microfiche Computer Program (<i>Appendix</i>)		14. <input type="checkbox"/> Deletion of Inventor(s) Signed statement attached deleting inventor(s) named in the prior application.
6. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Paper Copy (identical to computer copy) <input type="checkbox"/> Statement verifying identify of above copies		15. <input checked="" type="checkbox"/> Patent Application Data Entry Form 16. <input checked="" type="checkbox"/> Other: Recordation of Assignment Cover Sheet and copy of original Assignment
17. <input type="checkbox"/> If a CONTINUING APPLICATION, check appropriate box and supply the requisite information: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application Serial No. ____ / ____. Priority to the above application(s) is claimed under 35 U.S.C. 120. Prior application information: Examiner: _____. Group/Art Unit: _____. 18. <input type="checkbox"/> Priority - 35 U.S.C. 119 <input type="checkbox"/> Priority of application Serial No. _____ filed on _____ in _____ is claimed under 35 U.S.C. 119. <input type="checkbox"/> The certified copy has been filed in prior U.S. application Serial No. _____ / _____ on _____. <input type="checkbox"/> The certified copy will follow.		
CORRESPONDENCE ADDRESS		SIGNATURE BLOCK
Direct all correspondence to: Patent Administrator Testa, Hurwitz & Thibeault, LLP High Street Tower 125 High Street Boston, MA 02110 Tel. No.: (617) 248-7000 Fax No.: (617) 248-7100		<p>Respectfully submitted,  David G. Miranda Agent for Applicant Testa, Hurwitz & Thibeault, LLP High Street Tower 125 High Street Boston, MA 02110</p>

MIRANDDG\1545\83.1000339_1

FEE TRANSMITTAL

Note: Effective January 10, 2000.
Patent fees are subject to annual revision

Complete if Known	
Application Serial Number	Not Yet Assigned
Filing Date	Herewith
First Named Inventor	Richard Hayton
Group Art Unit	Not Yet Assigned
Examiner Name	Not Yet Assigned
Attorney Docket No.	CTX-049

METHOD OF PAYMENT		FEE CALCULATION (continued)																																																											
1. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Checks <input type="checkbox"/> Money Order <input type="checkbox"/> Other		3. ADDITIONAL FEES																																																											
2. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to credit or charge any fee indicated below to Deposit Account No. 20-0531. <input type="checkbox"/> Required Fees (copy of this sheet enclosed). <input checked="" type="checkbox"/> Additional fee required under 37 CFR 1.16 and 1.17. <input checked="" type="checkbox"/> Overpayment Credit.		Large Entity Fee (\$)	Small Entity Fee (\$)																																																										
			Fee Description																																																										
			Fee Paid																																																										
FEE CALCULATION																																																													
1. FILING FEE																																																													
<table border="1"> <thead> <tr> <th>Large Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>690</td> <td>Utility filing fee</td> <td>690.00</td> </tr> <tr> <td>310</td> <td>Design filing fee</td> <td></td> </tr> <tr> <td>150</td> <td>Provisional filing fee</td> <td></td> </tr> </tbody> </table>				Large Entity Fee (\$)	Fee Description	Fee Paid	690	Utility filing fee	690.00	310	Design filing fee		150	Provisional filing fee																																															
Large Entity Fee (\$)	Fee Description	Fee Paid																																																											
690	Utility filing fee	690.00																																																											
310	Design filing fee																																																												
150	Provisional filing fee																																																												
<table border="1"> <thead> <tr> <th>Number Filed</th> <th>Number Extra</th> <th>Rate</th> <th>Amount</th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td>33</td> <td>- 20 = 13</td> <td>x \$ 18.00 = 234.00</td> </tr> <tr> <td>Independent Claims</td> <td>4</td> <td>- 3 = 1</td> <td>x \$ 78.00 = 78.00</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Multiple Dependent Claim(s), if any</td> <td>\$260.00 =</td> <td></td> </tr> <tr> <td colspan="4" style="text-align: right;">TOTAL: 1,002.00</td> </tr> </tbody> </table>				Number Filed	Number Extra	Rate	Amount	Total Claims	33	- 20 = 13	x \$ 18.00 = 234.00	Independent Claims	4	- 3 = 1	x \$ 78.00 = 78.00	<input type="checkbox"/> Multiple Dependent Claim(s), if any		\$260.00 =		TOTAL: 1,002.00																																									
Number Filed	Number Extra	Rate	Amount																																																										
Total Claims	33	- 20 = 13	x \$ 18.00 = 234.00																																																										
Independent Claims	4	- 3 = 1	x \$ 78.00 = 78.00																																																										
<input type="checkbox"/> Multiple Dependent Claim(s), if any		\$260.00 =																																																											
TOTAL: 1,002.00																																																													
SMALL ENTITY DISCOUNT: SUBTOTAL (1) (\$ 1,002.00)																																																													
2. AMENDMENT CLAIM FEES																																																													
<table border="1"> <thead> <tr> <th>Claims Remaining After Amend.</th> <th>Highest No. Previously Paid For</th> <th>Present Extra</th> <th>Rate</th> <th>Fee Paid</th> <th>SUBTOTAL (3) (\$ 40.00)</th> </tr> </thead> <tbody> <tr> <td>Total Indep.</td> <td>- =</td> <td>x \$ 18.00 =</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>- =</td> <td>x \$ 78.00 =</td> <td></td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> First Presentation of Multiple Dep. Claim</td> <td></td> <td>+ \$260.00 =</td> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="2"></td> <td>TOTAL: (\$)</td> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="2"></td> <td>SMALL ENTITY DISCOUNT:</td> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="2"></td> <td>SUBTOTAL (2) (\$0.00)</td> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="2"></td> <td></td> <td></td> <td></td> <td style="text-align: right;">TOTAL (\$ 1,042.00)</td> </tr> <tr> <td colspan="2"> CORRESPONDENCE ADDRESS </td> <td colspan="3"> SIGNATURE BLOCK </td> </tr> <tr> <td colspan="2"> Direct all correspondence to: Patent Administrator Testa, Hurwitz & Thibeault, LLP High Street Tower-125 High Street Boston, MA 02110 Tel. No.: (617) 248-7000 Fax No.: (617) 248-7100 </td> <td colspan="3"> Respectfully submitted,  David G. Miranda Agent for the Applicant Testa, Hurwitz & Thibeault, LLP High Street Tower-125 High Street Boston, MA 02110 </td> </tr> </tbody> </table>				Claims Remaining After Amend.	Highest No. Previously Paid For	Present Extra	Rate	Fee Paid	SUBTOTAL (3) (\$ 40.00)	Total Indep.	- =	x \$ 18.00 =					- =	x \$ 78.00 =				<input type="checkbox"/> First Presentation of Multiple Dep. Claim		+ \$260.00 =						TOTAL: (\$)						SMALL ENTITY DISCOUNT:						SUBTOTAL (2) (\$0.00)									TOTAL (\$ 1,042.00)	CORRESPONDENCE ADDRESS		SIGNATURE BLOCK			Direct all correspondence to: Patent Administrator Testa, Hurwitz & Thibeault, LLP High Street Tower-125 High Street Boston, MA 02110 Tel. No.: (617) 248-7000 Fax No.: (617) 248-7100		Respectfully submitted,  David G. Miranda Agent for the Applicant Testa, Hurwitz & Thibeault, LLP High Street Tower-125 High Street Boston, MA 02110		
Claims Remaining After Amend.	Highest No. Previously Paid For	Present Extra	Rate	Fee Paid	SUBTOTAL (3) (\$ 40.00)																																																								
Total Indep.	- =	x \$ 18.00 =																																																											
	- =	x \$ 78.00 =																																																											
<input type="checkbox"/> First Presentation of Multiple Dep. Claim		+ \$260.00 =																																																											
		TOTAL: (\$)																																																											
		SMALL ENTITY DISCOUNT:																																																											
		SUBTOTAL (2) (\$0.00)																																																											
					TOTAL (\$ 1,042.00)																																																								
CORRESPONDENCE ADDRESS		SIGNATURE BLOCK																																																											
Direct all correspondence to: Patent Administrator Testa, Hurwitz & Thibeault, LLP High Street Tower-125 High Street Boston, MA 02110 Tel. No.: (617) 248-7000 Fax No.: (617) 248-7100		Respectfully submitted,  David G. Miranda Agent for the Applicant Testa, Hurwitz & Thibeault, LLP High Street Tower-125 High Street Boston, MA 02110																																																											